

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO. **09/936324** FILING DATE _____
APPLICANT(S) _____

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
101						1
102						1
103						1
104					1	
105					1	
106					1	
107					1	
108					1	
109					1	
110					1	
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143					1	
144					1	
145					1	
146					1	
147					1	
148					1	
149					1	
150					1	
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						

	*	*	*	*
	IND.	DEP.	IND.	DEP.
151				
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98				
99				
100				
TOTAL IND.				
TOTAL DEP.				
TOTAL CLAIMS				

* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.

09/936324

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1						
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49						
50						
TOTAL IND.			↓		↓	
TOTAL DEP.		↔		↔		↔
TOTAL CLAIMS						

	*		*		*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
51						
52						
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54						
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74						1
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78						1
79						1
80					1	
81						1
82					1	
83						1
84					1	
85						1
86					1	
87						1
88					1	
89						1
90					1	
91						1
92					1	
93						1
94					1	
95						1
96					1	
97						1
98					1	
99						1
100					1	
TOTAL IND.			↓		↓	
TOTAL DEP.		↔		↔	↔	↔
TOTAL CLAIMS						

* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS